

Amendments to Senate Bill No. 135
1st Reading Copy

Requested by Senator Jim Keane

For the Senate Business, Labor, and Economic Affairs Committee

Prepared by Pat Murdo
January 22, 2009 (5:49pm)

1. Title, page 1, line 7.
Strike: "REGISTERING AND"

2. Title, page 1, line 13.
Strike: the first "AND"
Following: "33-22-2008,"
Insert: "AND 53-4-1004,"

3. Page 2, line 7.
Following: "from the"
Insert: "reporting"
Strike: "of this section"
Insert: "under subsection (3) "

4. Page 5, line 13.
Strike: "gross" through "commissions"
Insert: "wages, as defined in 39-71-123"

5. Page 5, line 15 through line 16.
Strike: "gross" on line 15 through "business" on line 16
Insert: "wages, as defined in 39-71-123"

6. Page 5, line 27.
Strike: "medicare or"
Strike: "Titles XVIII and"
Insert: "Title"
Following: "Act"
Strike: ", respectively" through "eligible"
Insert: "may become ineligible"

7. Page 10.
Following: line 18
Insert: "Section 6. Section 53-4-1004, MCA, is amended to read:
"53-4-1004. (Temporary) Eligibility for program --
rulemaking. (1) To be considered eligible for the program, a
child:
(a) must be 18 years of age or younger;

(b) must have a combined family income at or below 250% of the federal poverty level or at a lower level determined by the department of public health and human services as provided in subsection (4);

(c) may not already be covered by private insurance that offers creditable coverage, as defined in 42 U.S.C. 300gg(c), for 3 months prior to enrollment in the program or since birth, whichever period is less, except that the break in coverage is waived for a covered dependent whose coverage moves from the purchasing pool provided under Title 33, chapter 22, part 20, to coverage under this part;

(d) may not be eligible for medicaid benefits; and

(e) must be a United States citizen or qualified alien and a Montana resident.

(2) The department of public health and human services shall adopt rules that establish the program's criteria for residency. The criteria must conform as nearly as practicable with the residency requirements for medicaid eligibility.

(3) Subject to 53-4-1009(3), rules governing eligibility may also include financial standards and criteria for income and resources, treatment of resources, and nonfinancial criteria.

(4) If the department determines that there is insufficient funding for the program, it may lower the percentage of the federal poverty level established in subsection (1)(b) in order to reduce the number of persons who may be eligible to participate or may limit the amount, scope, or duration of specific services provided. (Terminates on occurrence of contingency--sec. 15, Ch. 571, L. 1999; sec. 14, I.M. No. 155, approved November 4, 2008.)"

{ Internal References to 53-4-1004:

53-2-215 x 53-4-1002* x 53-4-1009 x 53-4-1012 x
53-4-1115x 53-4-1115x } "

Renumber: subsequent sections

8. Page 10.

Following: line 18

Insert: "NEW SECTION. Section 7. Contingent voidness.

[Section 6] is void on the date that the centers for medicare and medicaid services notifies the department of public health and human services of disapproval of the state plan amendment. The department of public health and human services shall notify the code commissioner of the date of the notification if the state plan amendment is disapproved."

Renumber: subsequent section

- END -